## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10,807,504

| (Column 1) (Column 2)  |  |                                  |                                |                       |                              |                  | TYPE                |                        | OR SMALL ENTITY         |                     |                        |
|--|--|----------------------------------|--------------------------------|-----------------------|------------------------------|------------------|---------------------|------------------------|-------------------------|---------------------|------------------------|
| TOTAL CLAIMS   |  |                                  | 14                             |                       |                              |                  | RATE                | FEE                    |                         | RATE                | FEE                    |
| FOR  |  |                                  | NUMBER FILED                   |                       | NUMBER EXTRA                 |                  | BASIC FEE           | 385.00                 | OR                      | BASIC FEE           | 770.00                 |
| TOTAL CHARGEABLE CLAIMS  |  |                                  | / // minus 20=                 |                       | * Ø                          |                  | X\$ 9=              |                        | OR                      | X\$18=              |                        |
| INDEPENDENT CLAIMS   |  |                                  | 2 minus 3 =                    |                       | * &                          |                  | X43=                |                        | OR                      | X86=                | 5                      |
| MU   | ILTIPLE DEPEN                                  | DENT CLAIM P                     | RESENT                         |                       |                              |                  | +145=               |                        | OR                      | +290=               | . /                    |
| * If   | the difference                                 | in column 1 is                   | ess than zero, enter "0" in co |                       |                              | olumn 2          | TOTAL               |                        | OR                      | TOTAL               | 770                    |
|  | C  | LAIMS AS A                       | MENDED - PART II               |                       |                              |                  | 014411              | 00                     | OTHER THAN SMALL ENTITY |                     |                        |
|  |  | (Column 1)                       | (Columi                        |                       |                              | (Column 3)       | SMALL               | ENTITY                 | OR                      | SWALL               |                        |
| AMENDMENT A  |  | CLAIMS REMAINING AFTER AMENDMENT |                                | NUM<br>PREVIO<br>PAID | BER<br>OUSLY                 | PRESENT<br>EXTRA | RATE                | ADDI-<br>TIONAL<br>FEE |                         | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *                                | Minus                          | **                    |                              | =                | X\$ 9=              |                        | OR                      | X\$18=              | <u>.</u>               |
|  | Independent                                    | *                                | Minus                          | ***                   |                              | =                | X43=                |                        | OR                      | X86=                |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                  |                                |                       |                              |                  | +145=               |                        | OR                      | +290=               |                        |
|  |  |                                  |                                |                       |                              |                  | TOTAL<br>ADDIT. FEE |                        | OR                      | TÖTAL<br>ADDIT, FEE |                        |
|  |  | (Column 1)                       |                                | (Colu                 | mn 2\                        | (Column 3)       | ADDITEL             |                        |                         |                     |                        |
| NT B   |  | CLAIMS REMAINING AFTER AMENDMENT |                                | HIGH<br>NUM<br>PREVI  | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA | RATE                | ADDI-<br>TIONAL<br>FEE |                         | RATE                | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT  | Total  | *                                | Minus                          | **                    |                              | =                | X\$ 9=              |                        | OR                      | X\$18=              |                        |
|  | Independent                                    | *                                | Minus                          | ***                   | <del></del>                  | =                | X43=                |                        | OR                      | X86=                |                        |
| _  | FIRST PRESE                                    | NTATION OF M                     | ULTIPLE DE                     | PENDEN'               | T CLAIM                      |                  | +145=               |                        | OR                      | +290=               |                        |
|  |  |                                  |                                |                       |                              |                  | TOTAL               |                        | OR                      | TOTAL<br>ADDIT. FEE |                        |
|  |  | (Column 1)                       |                                | (Colu                 | mn 2)                        | (Column 3)       | ADDIT. FEE          |                        |                         | ADDIT: 1 CC         |                        |
| AMENDMENT C  | `  | CLAIMS REMAINING AFTER AMENDMENT |                                | HIGI<br>NUN<br>PREVI  | HEST<br>MBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA | RATE                | ADDI-<br>TIONAL<br>FEE |                         | RATE.               | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *                                | Minus                          | **                    |                              | =                | X\$ 9=              |                        | OR                      | X\$18=              |                        |
| MEN  | Independent                                    | *                                | Minus                          | ***                   |                              | =                | X43=                |                        | OR                      | X86=                |                        |
| [  | FIRST PRESENTATION OF MULTIPLE DEPENDE         |                                  |                                |                       |                              |                  | 145                 |                        | i                       | +290=               | 1                      |
|  | If the entry in colu                           | ımn 1 je lece than t             | he entry in col                | umn 2 writ            | te "O" in co                 | olumn 3.         | +145=<br>TOTAL      |                        | OR                      | TOTAL               |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |                                  |                                |                       |                              |                  |                     |                        |                         |                     |                        |